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Application Number	10	707994
Filing Date	_ 3	0-Jan-2004
First Named Inventor	Alb	erto
Art Unit		642
Examiner Name	Fet	teroif, Brandon J
Attorney Docket Number	1.2	42.1

I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
OR I hereby appoint the practitioners associated with the Customer Number:								
Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 2 4 2 8 9								
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i em the: Applicant/inventor.								
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature Limita V. Boots								
Name	ame Kenneth D. Goetz Vice President Mallinckrodt Inc.							
Date	19-	Dec-2007			elephone	514 6		8778
NOTE: Signatures of all the inventors or assignces of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				orms if more than one				
"Total of forms are submitted.								

This collection of information is required by 37 CFR 1.56. The information is required to obtain or relain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S. 0, 12 and 37 CFR 1.11 and 1.14. This collection is estimated to last 37 minutes to complete including gaintering, prepring, and sustraining the completed position from the INSEPTO. The will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Pealeriner of Comments, P.O. Stort 1455, Alexandria, V.A. 2213-14460. ONITY SERV FEES OR COMPLETED PROVISION TO HIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Patent Cooperation Treaty

Appointment of Agent

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	all of:					
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as agents to act on its behalf before the competent International Authorities in						
	connection with any and all international applications filed by it and to receive					

St. Louis, Missouri, United States of America

The undersigned applicant hereby appoints:

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University of Zurich

payments on its behalf.

name: Prof. Dr. A. Borbély title: Vice President Research